M/D-6

MIDDLE DIST	S DISTRICT COURT FOR THE [RICT OF ALABAMA
LEE ESCO	e destination de la company de
Plaintiff(s)	2:0600169-W
SOUTHERN HEALTH PARTNERS, KENNETH NICHOLS, M.D. TINA ELLIS, et al. Defendant(s)	

MOTION TO PROCEED IN FORMA PAUPERIS

moves this Honorable Court for an order allowing her/him to proceed in this case without prepayment of fees, costs, or security therefor, and for grounds therefor submits the attached sworn affidavit in support of the motion.

Plaintiff(s) signature

SAO 240 (Rev. 10/03)

UNITED STATES	DISTRICT COURT
MIDDLE Distric	et of ALABAMA TO TOTAL A STEEL
LEE ESEO Plaintiff V.	APPLICATION TO PROCEED WITHOUT PREPAYMENT OF FEES AND AFFIDAVIT
SOUTHERN HEALTH PAR	TNERS, et al
I,	declare that I am the (check appropriate box)
in the above-entitled proceeding; that in support of my requinder 28 USC §1915 I declare that I am unable to pay the cosought in the complaint/petition/motion.	osts of these proceedings and that I am entitled to the relief
In support of this application, I answer the following quest	tions under penalty of perjury:
1. Are you currently incarcerated? Yes	□ No (If "No," go to Part 2)
If "Yes," state the place of your incarceration	TAOBA METONTAL
Are you employed at the institution? NO Do y	ou receive any payment from the institution? NO
Attach a ledger sheet from the institution(s) of your in transactions.	carceration showing at least the past six months'
2. Are you currently employed? ☐ Yes	No.
a. If the answer is "Yes," state the amount of your tak and address of your employer.	e-home salary or wages and pay period and give the name
b. If the answer is "No," state the date of your last empand pay period and the name and address of your UNEMPLOYED	ployment, the amount of your take-home salary or wages last employer.
3. In the past 12 twelve months have you received any mo	Orion from any of the City
 a. Business, profession or other self-employment b. Rent payments, interest or dividends c. Pensions, annuities or life insurance payments d. Disability or workers compensation payments e. Gifts or inheritances f. Any other sources 	Yes
If the answer to any of the above is "Yes," describe, on amount received and what you expect you will continue	the following page, each source of money and state the to receive.

AO 2	40 Reverse (Rev. 10/03)
1	IWAS ON WORK RELEASE FROM JUNE 31,2006 THRU AUGUST 309,2006 AND I EARNED \$2,0000 BUT I HAD TO PAY A PER CENTAGE OF THAT EARNING THE JAIL AND THE BALACE WENT TO MY GAMIL
4.	Do you have any cash or checking or savings accounts?
	If "Yes," state the total amount.
5.	Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value? Yes
	If "Yes," describe the property and state its value.
6.	List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support. BRANDY MICHELE DAVIS / AM /2 17HE BREAD WINNER BRANDON LEE ESCO OF MY FAMILY.
I d	eclare under penalty of perjury that the above information is true and correct.
	27.20,2006 Let C. Louis Signature of Applicant

NOTICE TO PRISONER: A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.